FORM B1 United States Bank Northern District of	ruptcy Court Illinois	Voluntary Petition						
Name of Debtor (if individual, enter Last, First, Middle): Steinmarch, Frank J.	Name of Joint Debtor (Spous	c) (Last, First, Middle):						
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names):						
Last four digits of Soc.Sec.No./Complete EIN or other Tax I.D. No. (if more than one, state all): 8966	Last four digits of Sec. Sec No./C. (if more than one, state a	ll):						
Street Address of Debtor (No. & Street, City, State & Zip Co 2844 Windsor Drive Lisle, IL 60532	odc): Street Address of Joint Debt	or (No. & Street, City, State & Zip Code):						
County of Residence or of the Principal Place of Business: Du Page	County of Residence or of the Principal Place of Business:	ne						
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint De	ebtor (if different from street address):						
Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principa preceding the date of this petition or for a longer part of suc There is a bankruptcy case concerning debtor's affiliate, get Type of Debtor (Check all boxes that apply) Individual(s) Railroad	ch 180 days than in any other District, neral partner, or partnership pending in th Chapter or Section of Ba	his District for 180 days immediately						
Corporation Stockbroker Partnership Commodity Broker Other Clearing Bank	_ 1 1	Chapter 11 Chapter 13 Chapter 12 to foreign proceeding						
Chapter 11 Small Business (Check all boxes that apply Debtor is a small business as defined in 11 U.S.C. § 10 Debtor is and elects to be considered a small business u 11 U.S.C. § 1121(c) (Optional)	Full Filing Fee attached Filing Fee to be paid in in Must attach signed applic	(Check one box) stallments (Applicable to individuals only) ation for the court's consideration is unable to pay fee except in installments. at Form No. 3. U.S. Dankruptcy Court						
Statistical/Administrative Information (Estimates only) Debtor estimates that funds will be available for distribution Debtor estimates that, after any exempt property is exclude be no funds available for distribution to unsecured creditors	cd and administrative expenses parime	Northern District Of Illino						
Estimated Number of Creditors [-15] 16-49 50-99	100-199 200-999 1000-ov-ase	: 05-61509						
Estimated Assets \$100,001 to \$1,000,000	11 to \$10,000,001 to \$50,000,001 True	h+a· M3/29/2006 a as.						
Estimated Debts 50 to \$50,001 to \$100,001 to \$500,001 to \$1,000,00 \$50,000 \$100,000 \$500,000 \$1 million \$10 mill		//						

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(Official Form 1) (12/03)

FORM B1, Page 2

Voluntary Petition	Name of Debtor(s):							
(This page must be completed and filed in every case) Prior Bankruptcy Case Filed Within Last 6 Ye	are (If more than one attach addition	nul cheet)						
•	ers (11 more than one, attach additional Case Number:	mai sneer) Date Filed:						
Location Northern District, Illinois Where Filed:	05-02983	1/31/2005						
Pending Bankruptcy Case Filed by any Spouse, Partner or A Name of Debtor:	Case Number:	pan one, anach additional spect) Date Filed:						
District:	Relationship;	Judge:						
Signat	ures							
Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7, 11 am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. X Signature of Debtor X Signature of Joint Debtor Address Signature of Attorney Firm Name Address Telephone Number Address Telephone Number Telephone Number	Exhibit (To be completed if debtor is (e.g., forms 10K and 10Q) w Commission pursuant to Sect Exchange Act of 1934 and is read to be a second of 1934 and is read to be completed if developed the whose debts are primal. I, the attorney for the petitioner of that I have informed the petitioner of the I have possess a threat of imminent and safety? Signature of Non-Attantantantantantantantantantantantantan	required to file periodic reports ith the Securities and Exchange ion 13 or 15(d) of the Securities equesting relief under chapter 11) ade a part of this petition. Be ebtor is an individual unity consumer debts) amed in the foregoing petition, declare or that [he or she] may proceed under that [he or she] may proceed under that [he or she] may proceed under that [he or she] but the consession of any property that identifiable harm to public health or the dand made a part of this petition. Derney Petition Preparer contition preparer as defined in 11U.S.C. cent for compensation, and that I have of this document. Petition Preparer						
Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	prepared or assisted in prepa If more than one person prep	_						
Signature of Authorized Individual Printed Name of Authorized Individual	Signature of Bankruptcy Peti	tion Preparer						
Title of Authorized Individual	of title 11 and the Federal Rules	s failure to comply with the provisions of Bankruptcy Procedure may result						
Date	in times or imprisonment or both	11 U.S.C. §110; 18 U.S.C. §156.						

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Frank J. Steinmarch, In re

Case No.

Debtor(s).

Chapter 7

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community maybe liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured non-priority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNL-QU-DATED	DISPUTED	AMOUNT OF CLAIM
Acct. No.							\$0.00
Acct. No.			May, 2003 to present				
Braselton and Millard One Tower Lane, Suite 1700 Oakbrook Terrace, IL. 60181							\$2,562.50
Acct. No. 4339 0535 2290 0029 CITI Cards P.O. Box 6415 The Lakes, NV. 88901-6415			Revolving charge				\$17,000.00
			Subtotal this page				\$19,562.50

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In re Frank J. Steinmarch,

Case No.

Debtor(s).

Chapter 7

D E B T O R	C . C	AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	NTINGENT	LIQUIDATED	SPUFED	OF CLAIM
		Revolving charge				\$12,000.00
		Revolving charge				\$6,000.00
		Revolving charge			<u>-</u>	\$20,300.00
		Revolving charge				\$ 242.00
		Revolving charge				\$69,000.00
		June, 2004 Motor Vehicle				\$21,402.00
	B T O	B r C	Revolving charge Revolving charge revolving charge Revolving charge Revolving charge Revolving charge Revolving charge	Revolving charge Revolving charge Revolving charge Revolving charge Revolving charge Revolving charge Revolving charge	Revolving charge June, 2004	Revolving charge June, 2004

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In re Frank J. Steinmarch,

Case No.

Debtor(s).

Chapter 7

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions.)	C O D E B T O R	C C L	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	D I SPUTED	AMOUNT OF CLAIM
Acct. No. 4311 9662 2128 8093			Revolving charge				
National City Elite VISA P.O. Box 500 Kalamazoo, Ml. 49081							\$22,500.00
Subtotal this page				\$22,500.00			
			TOTAL				\$171,006.50